

SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEMS Offeror To Complete Block 12, 17, 23, 24, & 30				1. Requisition Number SEE SCHEDULE		Page 1 Of 6			
2. Contract No. W56HZV-04-D-B103		3. Award/Effective Date 2004OCT01		4. Order Number 0001		5. Solicitation Number			
7. For Solicitation Information Call:		A. Name PATRICIA ANN BIERI			B. Telephone Number (No Collect Calls) (586)574-8286		6. Solicitation Issue Date		
9. Issued By TACOM WARREN AMSTA-AQ-ADBB WARREN, MICHIGAN 48397-5000 HTTP://CONTRACTING.TACOM.ARMY.MIL e-mail: BIERIP@TACOM.ARMY.MIL		Code W56HZV		10. This Acquisition Is <input checked="" type="checkbox"/> Unrestricted <input type="checkbox"/> Set Aside: % For <input type="checkbox"/> Small Business <input type="checkbox"/> Hubzone Small Business <input type="checkbox"/> 8(A) NAICS: 336211 Size Standard:		11. Delivery For FOB Destination Unless Block Is Marked <input type="checkbox"/> See Schedule <input checked="" type="checkbox"/> 13a. This Contract Is A Rated Order Under DPAS (18 CFR 700) 13b. Rating DOA4		12. Discount Terms	
15. Deliver To SEE SCHEDULE				Code		16. Administered By DCMA DAYTON AREA C, BUILDING 30 1725 VAN PATTON AVENUE WRIGHT PATTERSON AFB, OH 45433-5302			
Telephone No.				18a. Payment Will Be Made By DFAS - COLUMBUS CENTER DFAS-CO/NORTH ENTITLEMENT OPERATION P.O. BOX 182266 COLUMBUS OH 43218-2266					
17. Contractor/Offeror LIFELINE SHELTER SYSTEMS, INC. 2050 MCGRAW ROAD COLUMBUS, OH. 43207-4800		Code 1XNV7		Facility		Code HQ0337			
Telephone No. (614)497-8300		18b. Submit Invoices To Address Shown In Block 18a Unless Block Below Is Checked <input type="checkbox"/> See Addendum							
<input type="checkbox"/> 17b. Check If Remittance Is Different And Put Such Address In Offer									
19. Item No.		20. Schedule Of Supplies/Services			21. Quantity	22. Unit	23. Unit Price		24. Amount
		SEE SCHEDULE							
		(Use Reverse and/or Attach Additional Sheets As Necessary)							
25. Accounting And Appropriation Data ACRN: AA 2111 4109601034CPCP01082000025FB S40044 S40044							26. Total Award Amount (For Govt. Use Only) \$292,575.00		
<input type="checkbox"/> 27a.Solicitation Incorporates By Reference FAR 52.212-1,52.212-4,FAR 52.212-3 And 52.212-5 Are Attached. Addenda <input type="checkbox"/> Are <input type="checkbox"/> Are Not Attached.									
<input checked="" type="checkbox"/> 27b.Contract/Purchase Order Incorporates By Reference FAR 52.212-4. FAR 52.212-5 Is Attached. Addenda <input checked="" type="checkbox"/> Are <input type="checkbox"/> Are Not Attached.									
<input type="checkbox"/> 28. Contractor Is Required To Sign This Document And Return _____ Copies to Issuing Office. Contractor Agrees To Furnish And Deliver All Items Set Forth Or Otherwise Identified Above And On Any Additional Sheets Subject To The Terms And Conditions Specified Herein.					<input type="checkbox"/> 29. Award Of Contract: Ref. _____ Offer Dated _____. Your Offer On Solicitation (Block 5), Including Any Additions Or Changes Which Are Set Forth Herein, Is Accepted As To Items:				
30a. Signature Of Offeror/Contractor					31a. United States Of America (Signature Of Contracting Officer)				
30b. Name And Title Of Signer (Type Or Print)			30c. Date Signed		31b. Name Of Contracting Officer (Type Or Print) M. J. FRANZEN /SIGNED/ FRANZENM@TACOM.ARMY.MIL (586)574-6304			31c. Date Signed	

19. Item No.	20. Schedule Of Supplies/Services	21. Quantity	22. Unit	23. Unit Price	24. Amount

32a. Quantity In Column 21 Has Been

☐ Received ☐ Inspected ☐ Accepted, And Conforms To The Contract, Except As Noted: _____

32b. Signature Of Authorized Government Representative		32c. Date	32d. Printed Name and Title of Authorized Government Representative		
32e. Mailing Address of Authorized Government Representative			32f. Telephone Number of Authorized Government Representative		
			32g. E-Mail of Authorized Government Representative		
33. Ship Number		34. Voucher Number	35. Amount Verified Correct For	36. Payment	37. Check Number
<input type="checkbox"/> Partial	<input type="checkbox"/> Final			<input type="checkbox"/> Complete <input type="checkbox"/> Partial <input type="checkbox"/> Final	
38. S/R Account Number	39. S/R Voucher Number	40. Paid By			
41a. I Certify This Account Is Correct And Proper For Payment			42a. Received By (Print)		
41b. Signature And Title Of Certifying Officer			41c. Date	42b. Received At (Location)	
				42c. Date Rec'd (YY/MM/DD)	42d. Total Containers

CONTINUATION SHEET	Reference No. of Document Being Continued PIIN/SIIN W56HZV-04-D-B103/0001 MOD/AMD	Page 2 of 6
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Name of Offeror or Contractor: LIFELINE SHELTER SYSTEMS, INC.

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
1031	SUPPLIES OR SERVICES AND PRICES/COSTS NSN: 9999-99-103-0103 FSCM: CPAIQ PART NR: 103 TRK MOBILE BLOOD COLLE SECURITY CLASS: Unclassified				
1031AA	<u>FIRST ORDERING PERIOD</u> NOUN: 103TRKMOBILEBLOODCOLLECTION PRON: EH4W0097EH PRON AMD: 01 ACRN: AA AMS CD: 08200000000 CUSTOMER ORDER NO: W915WE41609945 NOUN: BLOODMOBILE FITTED WITH ESSENTIAL EQUIPMENT, IN ACCORDANCE WITH THE CONTRACT SPECIFICATIONS AT C.1, ATTACHED AS ATTACHMENT 001, AND THE INCORPORATED COMPLETED TECHNICAL INFORMATION QUESTIONNAIRE, ATTACHMENT 002. EACH BLOODMOBILE SHALL BE OVERPACKED WITH THE CONTRACTOR'S AVAILABLE OPERATOR MANUAL (ANY LANGUAGE). CONTRACTOR MUST PROVIDE AN ENGLISH AND ARABIC (DIALECT APPROPRIATE TO IRAQ) MANUAL (IN ACCORDANCE WITH C.2) WHICH IS INCLUSIVE OF THE PROPOSED UNIT PRICE. VEHICLES CAN BE AND WILL BE EXPECTED TO BE SHIPPED WITH THE AVAILABLE VEHICLE'S STANDARD MANUAL, IN WHATEVER LANGUAGE, BUT THE CONTRACTOR WILL BE PAID ONLY 80% OF THE TOTAL COST PER VEHICLE UPON ACCEPTANCE IF THE TWO REQUIRED LANGUAGE MANUALS ARE NOT INCLUDED WITH THE ORIGINAL SHIPMENT. WHEN ENGLISH AND ARABIC TRANSLATED MANUALS ARE PROVIDED, (ONE OR BOTH, WHATEVER COMPLETES THE REQUIREMENT OF BOTH MANUAL TYPES), THE ADDITIONAL 20% OF THE UNIT PRICE, PER VEHICLE, WILL BE PAID UPON ACCEPTANCE OF THE MANUALS. (End of narrative B001) <u>Packaging and Marking</u> STANDARD COMMERCIAL PRACTICE FOR SAFE DELIVERY TO BAGHDAD. (End of narrative D001)	1	EA	\$ 292,075.00000	\$ 292,075.00

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Name of Offeror or Contractor: LIFELINE SHELTER SYSTEMS, INC.

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
	<p><u>Inspection and Acceptance</u> INSPECTION: Destination ACCEPTANCE: Destination</p> <p><u>Deliveries or Performance</u> DOC SUPPL <u>REL CD</u> <u>MILSTRIP</u> <u>ADDR</u> <u>SIG CD</u> <u>MARK FOR</u> <u>TP CD</u> 001 W56HZV4166V097 Y00000 M 1 <u>PROJ CD</u> <u>BRK BLK PT</u> 9GV <u>DEL REL CD</u> <u>QUANTITY</u> <u>DAYS AFTER AWARD</u> 001 1 0175</p> <p>FOB POINT: Destination</p> <p>SHIP TO: <u>FREIGHT ADDRESS</u> (Y00000) SHIPPING INSTRUCTIONS FOR CONSIGNEE (SHIP-TO) WILL BE FURNISHED PRIOR TO THE SCHEDULED DELIVERY DATE FOR ITEMS REQUIRED UNDER THIS REQUISITION.</p> <p><u>CONTRACT/DELIVERY ORDER NUMBER</u> W56HZV-04-D-B103/0001</p> <p>SHIP TO: BIAP WAREHOUSE NORTH Abu Ghurayab DISTRIBUTION CENTER 2C Al-Waleed/Al-Zaitoon Neighborhood Baghdad, Iraq GRID: 38MB2637875 POC: GARY STEVENSON CPA-PMO NON-CONSTRUCTION TEAM REPUBLICAN PRESIDENTIAL PALACE BAGHDAD, IRAQ PHONE: 914-822-5235</p> <p>(End of narrative F001)</p>				

CONTINUATION SHEET	Reference No. of Document Being Continued PIIN/SIIN W56HZV-04-D-B103/0001 MOD/AMD	Page 4 of 6
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Name of Offeror or Contractor: LIFELINE SHELTER SYSTEMS, INC.

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
2001	NSN: Interim Control Number FSCM: CPAIQ PART NR: MANUALSFOR103,TRK,BLOODCOL SECURITY CLASS: Unclassified				
2001AA	<p>SUPPLEMENTAL MANUALS IAW CLIN 1031AA</p> <p>NOUN: MANUALSFOR103TRKBLOODCOLLECT. PRON: EH4W0106EH PRON AMD: 01 ACRN: AA AMS CD: 08200000000 CUSTOMER ORDER NO: W915WE41609945</p> <p>NOUN: SERVICE/REPAIR/OPERATOR MANUALS FOR THE MINISTRY OF HEALTH & EDUCATION IN ACCORDANCE WITH C.2.</p> <p>(End of narrative B001)</p> <p>Packaging and Marking</p> <p>Inspection and Acceptance INSPECTION: Destination ACCEPTANCE: Destination</p> <p>Deliveries or Performance DOC SUPPL REL CD MILSTRIP ADDR SIG CD MARK FOR TP CD 001 W56HZV4146V272 Y00000 M 1 PROJ CD BRK BLK PT 9GV DEL REL CD QUANTITY DAYS AFTER AWARD 001 1 0175</p> <p>FOB POINT: Destination</p> <p>SHIP TO: FREIGHT ADDRESS (Y00000) SHIPPING INSTRUCTIONS FOR CONSIGNEE (SHIP-TO) WILL BE FURNISHED PRIOR TO THE SCHEDULED DELIVERY DATE FOR ITEMS REQUIRED UNDER THIS REQUISITION.</p> <p>CONTRACT/DELIVERY ORDER NUMBER W56HZV-04-D-B103/0001</p> <p>SHIP TO:</p> <p>PCO PROJECT MANAGER: MINISTRY OF HEALTH & EDUCATION</p>	1	EA	\$ 500.00000	\$ 500.00

Name of Offeror or Contractor: LIFELINE SHELTER SYSTEMS, INC.

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
	<div>APO AE 09316</div> <div>ATTN: TACOM VEHICLE DISTRIBUTION MANAGER</div> <div>(End of narrative F001)</div>				

Name of Offeror or Contractor: LIFELINE SHELTER SYSTEMS, INC.

CONTRACT ADMINISTRATION DATA

LINE	PRON/ AMS CD/	OBLG					JOB ORDER	ACCOUNTING	OBLIGATED
<u>ITEM</u>	<u>MIPR</u>	<u>ACRN</u>	<u>STAT</u>	<u>ACCOUNTING CLASSIFICATION</u>			<u>NUMBER</u>	<u>STATION</u>	<u>AMOUNT</u>
1031AA	EH4W0097EH	AA	2	2111	4109601034CPCP01082000025FB	S40044		S40044	\$ 292,075.00
	08200000000								
	W915WE41609945								
2001AA	EH4W0106EH	AA	2	2111	4109601034CPCP01082000025FB	S40044		S40044	\$ 500.00
	08200000000								
	W915WE41609945								
								TOTAL	\$ 292,575.00
SERVICE							ACCOUNTING	OBLIGATED	
<u>NAME</u>		<u>TOTAL BY ACRN</u>		<u>ACCOUNTING CLASSIFICATION</u>			<u>STATION</u>	<u>AMOUNT</u>	
Army		AA		2111	4109601034CPCP01082000025FB	S40044	S40044	\$ 292,575.00	
								TOTAL	\$ 292,575.00